



February 1, 2018
Behavioral Health Advisory Board
Meeting Minutes

P.O. BOX 85524
San Diego, CA 92186-5524
(619) 563-2700 • FAX (619) 563-2775/2705

MEMBERS PRESENT

Joel San Juan – District 1
Bill Stewart – District 1
Michael Matthews – District 2
Jenifer Mendel, Chairperson – District 2
Deanne George – District 3
Colin MacKinnon – District 3
Ed Weiner – District 3
Tom Behr – District 4
Jerry Hall, Member-at-Large (ADS) – District 4
John Sturm, 1st Vice Chair – District 4
Judith Yates – District 4
Richard McGaffigan, Member-at-Large (MH) – District 5

MEMBERS NOT PRESENT

Eyra Leeper – District 1
Rebecca Hernandez, 2nd Vice Chair – District 2
Phil Deming – District 5
Dana Hamilton – District 5
K.C. Strang – District 5

STAFF TO THE BEHAVIORAL HEALTH ADVISORY BOARD

Alfredo Aguirre, Director, Behavioral Health Services (BHS)
Ben Parmentier, Administrative Analyst III, Behavioral Health Services

I. CALL TO ORDER

The Behavioral Health Advisory Board (BHAB) meeting was called to order by Jenifer Mendel, Chair, at 2:30 p.m. at the County Administration Center, 1600 Pacific Highway, San Diego, California 92101, Room 302.

II. INTRODUCTION OF BOARD MEMBERS

Members of the BHAB introduced themselves.

III. APPROVAL OF THE MINUTES – FEBRUARY 1, 2018

ON MOTION of John Sturm, seconded by Michael Matthews, the BHAB approved the minutes of February 1, 2018 as written.

AYES: 8 NAYS: 0 ABSTENTIONS: 2

IV. PUBLIC COMMENT

None

V. PRESENTATION: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE

Bob Elliott, San Diego Chapter President

Bob Elliott came before the board to discuss the National Council on Alcoholism and Drug Dependence (NCADD). The San Diego Chapter of the NCADD wants the community to know that they work with their local Affiliate Network to provide services that would help individuals with alcoholism and drug dependence. Some of the services include information and referral services, intervention and DUI programs,

communication education and mobilization, outpatient and residential treatment. Their mission is to have people that need recovery to get into recovery.

DISCUSSION:

Q: Since we have merged behavioral health and addiction issues together, is there a diagnosis that you use for people that need assistance?

A: I am not a doctor. I receive calls all the time from people in their addiction or problem that don't know where to go to get help. Sometimes the individual can get worse because they do not know where to go.

Q: Would this be an extension of 2-1-1?

A: I am not able to discuss the efficiency of 2-1-1. But I have received calls from people who have tried to use 2-1-1 and are not successful. Sometimes they get confused because going to 2-1-1 might give them too many options and based on what they chose, are different answers for each.

VI. PRESENTATION: DRUG MEDI-CAL ORGANIZED DELIVERY SYSTEM

Alfredo Aguirre, Director, Behavioral Health Services

Dr. Nicole Esposito, Assistant Medical Director, Behavioral Health Services

The Drug Medi-Cal Organized Delivery System (DMC-ODS) is set to be implemented in July 2018. The objectives with the implementation are: increase network capacity and offer new services, increase local oversight, and ensure efficient care coordination and linkages. The new system would increase what is covered under the expanded DMC-ODS system and increase what is covered by Medi-Cal.

DISCUSSION:

Q: What are we going to do differently? Since most of these people will fall under Managed Care Plans, would they be under the County's care plan or Medi-Cal's?

A: The County of San Diego is still providing for SUD's. Managed care plans can do screenings referrals.

Q: We are backlogged for good case management and timely access. How will we get that transformation if we don't acknowledge where we have current weaknesses and work on those simultaneously.

A: We won't be there at day 1. One of the things we wish we could provide is lower caseloads and more case management. There is a difference between BH case management and substance abuse case management.

Q: Financial risk: There is a local cost and a County cost. Will there be an impact on mental health funding?

A: Behavioral Health Alignment dollars are intended to fund substance abuse disorders. However, Counties could use monies for other services. We put this money aside to designate it for this purpose. Our commitment from the County is to identify revenues dedicated to this initiative.

Q: Regarding Case Management: You will need a case manager to refer to another program. Who is going to pay for that program?

A: This doesn't fund all the needs. The community will still need to help us provide the services to these individuals.

Q: What if someone has a concurrent issue such as substance abuse and mental health disorder. Would it be billed from two different funding accounts?

A: We have MHSA dollars in substance abuse funding. We have three programs that are co-located (hybrid model) mental health component and substance abuse component. When being seen for mental health, they will use the mental health component. We cannot bill seamlessly. However, patients are able to have an appointment one day for one services and on another day, another services.

Q: I want to make sure there is a universal way of reporting wait time issues information. Are there people receiving different months of care based on the current level of care?

A: The new system will be able to connect between levels of care. They will work to transition a person to recovery residency or another program.

Q: Is there an exception that works with people that are going to the emergency room frequently? Is there an exception for people who might need a longer time over the two 30 day visits.

A: When the authorization data first came out, the counties picked up on the time limits. They want to review the pilot data after 1 year and see if it needs to be adjusted. There is also special language for groups of people including perinatal and criminal justice that could have extended stays but the County will have to pay for it. We are currently trying to get more information about this.

In regards to access times, the State has finally disclosed what information to collect. We are currently building in fields to such as the date that the client requests the service, date the appointment was offered, and the date the client accepted the appointment. We would be able to search for data and provide it to the state.

Q: Is this two episodes that are annual?

A: It is based on the client's date of episodes. It is not a calendar or fiscal year.

Q: Could a client be in a program and use medical marijuana?

A: We are going to navigate in our provider manual. A program would have to have a treatment plan and what a client's medications are. It would also depend on who is prescribing the marijuana.

Q: Are there any protections on the increase of case management? Is there a plan to expand it? We will need to increase in order to accommodate it.

A: Under current system the perinatal programs that can offer and have a case management. Under DMS it will be paid for and provided. There will be more FTE's and case management when the new system is implemented.

VII. INFORMATIONAL ITEM: NO PLACE LIKE HOME BOARD LETTER

Kelly Salmons, Program Coordinator, Housing and Community Development Services

This item has been moved to a future meeting.

VIII. DIRECTOR'S REPORT

Alfredo Aguirre, Director, Behavioral Health Services

- The Roadmap for HHSA Behavioral Health Services is being finalized and will be sent out soon. Thank you for your input.
- The 2018 State of the County Address is being presented by Supervisor Gaspar on February 27th at 6pm in La Jolla at the Scripps Seaside Forum.
- 2017 Community Engagement report is in your packet. Adrienne Yancey will return next month to plan the 2018 report.

IX. CHAIRPERSON'S REPORT

Jenifer Mendel, Chair

- Drug Medi-Cal Workgroup- There might be more people interested in this workgroup from before.
- BHAB Annual Report (2017) is being drafted. Ben is asking for quotes and photos to include that you would like to highlight. Looking for a final draft by February 16th.
- Ethics and re-appointment. Ben is sending out notices to those that need the ethics training or have been reappointed.

X. ADVOCATE REPORTING

- Jenifer Mendel and Jerry Hall went to the Association of Behavioral Health Boards and Commissions which is a statewide training. Jerry wrote a report that he can share.

XI. BOARD MEMBER COLLABORATION: DISCUSSION

- Propose to set up monthly topics for open collaboration time in order to know information prior to meeting. Information would go to Ben and the information can be included in the packet. Be better able to make decisions.
- Drug Medi-Cal workgroup – Want to start meeting again through the end of the year. Will be placed on agenda for March. Question on how many board members can join a workgroup. Proposed to use this time to discuss DMC-ODS instead of doing another group meeting.
- Contracts and procurements – Need board authority. Once approved, it is a public document that BHS can share.
- Incorporate BHAB discussions to help Behavioral Health Services meet community member's needs.

XII. MEETING ADJOURNMENT

ON MOTION of John Sturm, seconded by Joel San Juan, the meeting adjourned at 4:40 p.m.

AYES: 11 NAYS: 0 ABSTENTIONS: 0

Brown Act Procedure: *As required by California Government Code 54950 et seq. (Ralph M. Brown Act), a copy of the packet of information that was mailed to Behavioral Health Advisory Board members at the point of posting of this agenda has been placed at the reception desk at 3255 Camino Del Rio South, San Diego, CA 92108, for public inspection, and is available at the site of the meeting for public inspection. Members of the public wanting their own copy of the advance materials may request them under Government Code 6250 et seq. (Public Records Act) and receive them on payment of copying charges of \$0.20/page, and actual mailing charges, if mailing of the material is requested. If you are planning to attend and need special accommodations, you must call Jackson Alexander at (858) 505-6521, at least three days in advance of the meeting.*

Respectfully submitted,



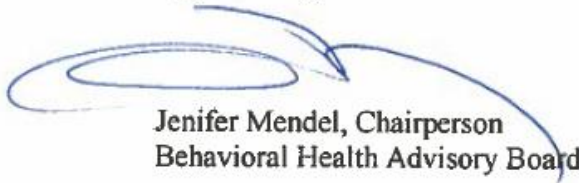
Sarah Alvarado, Secretary to the Director
Behavioral Health Services

Reviewed by,



Benjamin Parmentier, Administrative Analyst III
Behavioral Health Advisory Board Support Staff

Approved by,



Jenifer Mendel, Chairperson
Behavioral Health Advisory Board

For BHAB documents, agenda, minutes and Director's Reports, please read or download from
the Network of Care Behavioral Health Advisory Board at:
<http://sandiego.networkofcare.org/mh/content.aspx?id=257>